

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO | DATE     |
|---------------------------|----------|-------|----------|
| FEE DETERMINATION         |          |       |          |
| C.I.P.E. CLASSIFIER       |          |       |          |
| FORMALITY REVIEW          | LS       | 1089  | 10/01/01 |
| RESPONSE FORMALITY REVIEW | LS       | JC906 | 03/06/02 |
| il                        |          | 852   | 05-31-02 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date    |
|----------|---------|
| Final    |         |
| Original |         |
| 1        | 8/19/02 |
| 2        | ✓       |
| 3        | ✓       |
| 4        | ✓       |
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| Claim    | Date |
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| Claim    | Date |
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| Final    |      |
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

804  
 63/06  
 373  
 6/13